

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/881,080
	Filing Date	June 12, 2001
	First Named Inventor	GUINAN, Terry et al.
	Art Unit	3743
	Examiner Name	ODLAND, Kathryn P.
Total Number of Pages in This Submission	Attorney Docket Number	PA936 US

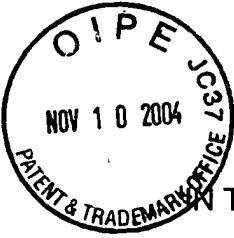
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Amendment to Add Inventor; Consent of Assignee; Redlined Copy of Filing Receipt; see below for additional papers.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	
	Executed Supplemental Declaration/Power of Attorney; Statement of Person to be Added as an Inventor; Supplemental Application Data Sheet; and Return Postcard	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Medtronic Vascular, Inc.		
Signature			
Printed name	Catherine C. Maresh		
Date	November 5, 2004	Reg. No.	35,268

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Kimberly Melvin	Date	November 5, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IPW/AF-61/A 3763

<p style="text-align: center;">CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 5, 2004.</p> <p>Signed: <u>Kimberly Melvin</u></p>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.	:	09/881,080	Confirmation No.:	8025
Applicant	:	GUINAN, Terry et al.		
Filed	:	June 12, 2001		
TC/A.U.	:	3743		
Examiner	:	ODLAND, Kathryn P.		
Docket No.	:	PA936		
Customer No.	:	28390		
Title	:	TIP SEAL TIP ATTACH		

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**AMENDMENT, REQUEST AND FEE TO DELETE AND/OR ADD TO ORIGINAL
ERRONEOUSLY NAMED OR NOT NAMED INVENTOR(S) IN – NONPROVISIONAL
APPLICATION – DECLARATION (37 CFR §1348(a))**

Sir:

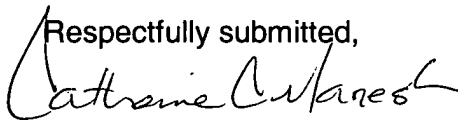
This amendment and request is to correct the incorrect original naming of inventor in the declaration under 37 CFR §1.48(a) as set for and filed on August 15, 2001.

Applicants request that addition of the following previously unnamed person as inventor of this application: **Ronan Rogers**.

Attached is the Supplemental Combined Declaration, Power of Attorney and Assignment and Statement under 37 CFR §1.48(a)(2) of A Person to Be Added As An Inventor.

The Commissioner is hereby authorized to charge the \$130.00 petition fee set forth in §1.17(h). Furthermore, the Commissioner is hereby authorized to charge any additional fees which may be required under 37 C.F.R. 1.17, or credit any overpayment, to Deposit Account No. 01-2525.

11/10/2004 YPOLITE1 00000049 012525 09881080
01 FC:1460 130.00 DA

Respectfully submitted,

Catherine C. Maresh
Reg. No. 35,268

Medtronic Vascular, Inc.
3576 Unocal Place
Santa Rosa, CA 95403
Fax: (707) 543-5420

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 5, 2004.

Signed: _____

Kimberly Melvin

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/881,080 Confirmation No.: 8025
Applicant : GUINAN, Terry et al.
Filed : June 12, 2001
TC/A.U. : 3743
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CONSENT OF THE ASSIGNEE UNDER 37 CFR §1.48(a)(4)

Sir:

Medtronic Vascular, Inc., assignee of the entire right, title and interest of the originally names inventors of the above-captioned application, consents to the change in inventorship from Terry Guinan, John Connolly, Pat Duane, Donagh O'Shaughnessy; and Michael Bannon to Terry Guinan, John Connolly, Pat Duane, Donagh O'Shaughnessy; Michael Bannon; and Ronan Rogers. I have read and understand 37 CFR §10.18(b).

For: Medtronic Vascular, Inc.

Signature: _____

Catherine C. Maresh
Senior Patent Counsel

Date: November 5, 2004

APPLICATION DATA SHEET,

APPLICATION INFORMATION

Application Number:: 09/881,080
Filing Date:: June 12, 2001
Application Type:: Regular
Subject Matter:: Utility
Title:: Tip Seal Tip Attach
Attorney Docket Number:: PA936 US
Request for Early Publication?: No
Request for Non-Publication?: No
Total Drawing Sheets:: 1
Small Entity:: No

APPLICANT INFORMATION

Applicant Authority Type:: 1st Inventor
Primary Citizenship Country:: IE
Status:: Full Capacity
Given Name:: TERRY
Family Name:: GUINAN
City of Residence:: Galway
Country of Residence:: Ireland
Street of mailing address:: Parkmore Business West
City of mailing address:: Galway
Country of mailing address:: Ireland

Applicant Authority Type:: 2nd Inventor
Primary Citizenship Country:: IE
Status:: Full Capacity
Given Name:: JOHN
Family Name:: CONNOLLY
City of Residence:: Galway
Country of Residence:: Ireland
Street of mailing address:: Parkmore Business West
City of mailing address:: Galway
Country of mailing address:: Ireland



Applicant Authority Type:: 3rd Inventor
Primary Citizenship Country:: IE
Status:: Full Capacity
Given Name:: PAT
Family Name:: DUANE
City of Residence:: Galway
Country of Residence:: Ireland
Street of mailing address:: Parkmore Business West
City of mailing address:: Galway
Country of mailing address:: Ireland

Applicant Authority Type:: 4th Inventor
Primary Citizenship Country:: IE
Status:: Full Capacity
Given Name:: DONAGH
Family Name:: O'SHAUGHNESSY
City of Residence:: Galway
Country of Residence:: Ireland
Street of mailing address:: Parkmore Business West
City of mailing address:: Galway
Country of mailing address:: Ireland

Applicant Authority Type:: 5th Inventor
Primary Citizenship Country:: IE
Status:: Full Capacity
Given Name:: MICHAEL
Family Name:: BANNON
City of Residence:: Galway
Country of Residence:: Ireland
Street of mailing address:: Parkmore Business West
City of mailing address:: Galway
Country of mailing address:: Ireland

Applicant Authority Type::	6 th Inventor
Primary Citizenship Country::	IE
Status::	Full Capacity
Given Name::	RONAN
Family Name::	ROGERS
City of Residence::	Galway
Country of Residence::	Ireland
Street of mailing address::	41 Cluain Riocaird, Headford Road
City of mailing address::	Galway
Country of mailing address::	Ireland

CORRESPONDENCE INFORMATION

Correspondence Customer Number::	28390
Name::	Medtronic Vascular, Inc.
Street of mailing address::	3576 Unocal Place
City of mailing address::	Santa Rosa
State/Province of mailing address::	CA
Country of mailing address::	US
Postal/Zip Code of mailing address::	95403
Phone Number::	(707) 543-0221
Fax Number::	(707) 543-5420
E-Mail address::	catherine.maresh@medtronic.com

ASSIGNEE INFORMATION

Assignee name::	Medtronic Vascular, Inc.
Street of mailing address::	3576 Unocal Place
City of mailing address::	Santa Rosa
State/Province of mailing address::	CA
Country of mailing address::	US
Postal/Zip Code of mailing address::	95403



PA936 US

Practitioner's Docket No. P936 US

PATENT

SUPPLEMENTAL COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for an original application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TIP SEAL TIP ATTACH

SPECIFICATION IDENTIFICATION

The specification was filed on June 12, 2001, U.S. Serial No. 09/881,080.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. § 1.98.

**POWER OF ATTORNEY**

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)

Michael J. Jaro
Catherine C. Maresh
Janis J. Biksa
James F. Crittenden
Alan F. Krubiner

REGISTRATION NUMBER(S)

34,472
35,268
33,648
39,560
29,289

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

28390

SEND CORRESPONDENCE TO

IP Legal
Medtronic Vascular, Inc.
3576 Unocal Place
Santa Rosa, CA 95403
28390

DIRECT TELEPHONE CALLS TO:

Phone (707) 543-0221

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

RONAN ROGERS

Inventor's signature

Date 28th Oct

Residence Galway City, County Galway, Ireland

Post Office Address 41 Cluain Riocaird, Headford Road, Galway City, County Galway, Ireland

Ronan Rogers

Country of Citizenship IE



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/881,080 Confirmation No.: 8025
Applicant : GUINAN, Terry
Filed : June 12, 2001
TC/A.U. : 3743
Examiner : ODLAND, Kathryn P.

Docket No. : PA936
Customer No. : 28390
Title : TIP SEAL TIP ATTACH

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

STATEMENT UNDER 37 CFR §1.48(A)(2)
OF A PERSON TO BE ADDED AS AN INVENTOR

Sir:

I am a co-inventor of the invention of one or more claims in the above-captioned nonprovisional application for which an oath or declaration under 37 CFR §1.63 has been filed erroneously not naming me as an inventor. The inventorship occurred without deceptive intent on my part. I have read and understand 37 CFR §10.18(b).

Date: 28th Oct '04

Signed: Ronan Rogers
Ronan Rogers



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

COPY

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/881,080	06/12/2001	3762	840	P936 US	1	1	1

CONFIRMATION NO. 8025

UPDATED FILING RECEIPT



OC000000006581471

IP Legal
Medtronic AVE, Inc.
3576 Unocal Place
Santa Rosa, CA 95403

Date Mailed: 09/20/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Terry Guinan, Galway, IRELAND;
John Connolly, Galway, IRELAND;
Pat Duane, Galway, IRELAND;
Donagh O'Shaughnessy, Galway, IRELAND;
Michael Bannon, Galway, IRELAND;
Ronan Rogers, Galway, IRELAND

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 08/08/2001

Projected Publication Date: 12/12/2002

Non-Publication Request: No

Early Publication Request: No

Title

Tip seal tip attach

Preliminary Class

604

COPY

Data entry by : GIZAW, ASTER

Team : OIPE

Date: 09/20/2001

[Handwritten signature]

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Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15**

COPY

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- The articles such as "a," "an" and "the" are not included as the first words in the title of an application. They are considered to be unnecessary to the understanding of the title.
- The words "new," "improved," "improvements in" or "relating to" are not included as first words in the title of an application because a patent application, by nature, is a new idea or improvement.
- The title may be truncated if it consists of more than 500 characters (letters and spaces combined).
- The docket number allows a maximum of 25 characters.
- If your application was submitted under 37 CFR 1.10, your filing date should be the "date in" found on the Express Mail label. If there is a discrepancy, you should submit a request for a corrected Filing Receipt along with a copy of the Express Mail label showing the "date in."
- The title is recorded in sentence case.

Any corrections that may need to be done to your Filing Receipt should be directed to:

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Office of Initial Patent Examination
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